PATENT APPLICATION FEC DETERMINATION RECORD Effective October 1, 2001

CLAIMS AS FILED PART I								SMALL ENTITY			OTHER THAN	
<u></u>	DTAL CLARGE		(Column	1)	(Column 2)			TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			and the second s					RATE	FEE	1	RATE	FEE
FOR 12			NUMBER FILED		NUMBER EXTRA			BASIC FEE	1445	OR	BASIC FEE	890
TC	TAL CHARGE	ABLE CLAIMS	13 minus 20= *					X\$ 9=		OR	· X\$18=	
INDEPENDENT CLAIMS			, minus 3 =					X42=		OR	X84=:	
MU	JLTIPLE DEPEN	NDENT CLAIM P	RESENT			F.		+140=		OR	+280=	7.0
* If the difference in column 1 is less than zero					r "0" in c	column 2	1	TOTAL		OR	TOTAL	280 1170
CLAIMS AS AMENDED - PART II									.:	4	OTHER	13.00
_	Property Commences	(Column 1)	(Column 2)			(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE:		RATE	ADDI- TIONAL FEE
	Total	* 13	Minus	-20)	=		X\$ 9=		OR	X\$18=	
	Independent	* /	Minus	15		=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					<u>. </u>		+140=		OR	+280=	
								TOTAL ADDIT: FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)											(r.	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=	Prague .	OR	X\$18=	
AME	Independent	*	Minus	***	. 61 414	=		X42=	17	on! OR	X84=	in jam i
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM	И		+140=		OR	+280=	
							L	SULLI FEEL		. 1.	—————————————————————————————————————	-0!
		(Column 1)		(Colur	nn 2)	(Column 3)					(Column	` {
AMENDMENT C		CLAIMS REMAINING AFTER ATTENDMENT		HIGH NUMI PREVIO	EST BER DUSLY	PRESENT EXTRA		. , -	ADDI- FIONAL:	+c. 4.	A5i '#	ADDI:
	To:a!		: Taus					2.5 \$ 0		OR		
	Independent	*	Minus	*** .		s	-	X42≑ Ξ	1577,775	, <u> </u>	—X84= -	1 1
	FIRST PRESENTATION OF MULTIPL			PLE DEPENDENT CLAIM						OR		
A Malayara di Arta da									OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR,	TOTAL ODIT, FEE	
		mber Previously Pa ber Previously Paid					r four	nd in the appi	i iopriate box			

ORIZ PTO-875 (Hav. 8/01)